



**Request for Extension of Graduate Assistantship
Interruption of Progress due to COVID-19 pandemic**

Student Name: _____
Last First Middle

Assistantship Type:

- Graduate Research Graduate Teaching Graduate Service

Student nine-digit ID: _____ Net ID: _____

Department: _____ First semester enrolled: _____

Graduate Program: _____ Expected graduation date: _____
Major/Concentration

- Master's thesis PhD

Please provide a detailed justification for why you are requesting an extension in the graduate assistantship. Please include information on how the COVID-19 pandemic impacted your ability to conduct the research components of your degree program. Include additional page if needed.

Typed	Approval Signatures*	
_____	_____	_____
Student Name		Date
_____	_____	_____
Major Professor		Date
_____	_____	_____
Graduate Coordinator		Date
_____	_____	_____
College Dean		Date
_____	_____	_____
Provost		Date

*Once all signatures have been secured, please submit completed form to the attention of Ms. Amanda Baine at abaine@grad.msstate.edu by 5:00 pm (CT) on Monday, March 29, 2021